

**Request to register
AGEHC UQTR Health Insurance Plan
International Students**



The international student request for health insurance plan must be done by filling this form and be submitted with your payment at the latest:

For the fall session: September 30th * For the winter session: le January 31st**

For payment **by bank transfer**, send the form by email at the following email address: student@majorplan.ca

For payment **by cheque**, mail to the following address:

Major Plan, 763, St-Joseph Boulevard, Gatineau,
Quebec, J8Y 4B7

Please write IN PRINT SCRIPT

PART 1 – UQTR'S SUBSCRIBER INFORMATION

UQTR's permanent code:

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Last Name: _____ First Name: _____

Address: _____

City : _____ Province : _____ Postal Code : _____

Email : _____ @ _____

PART 2 – REASONS FOR REGISTRATING TO THE ANNUAL HEALTH COVERAGE

I am an international student and I wish to benefit from the supplementary health coverage at the additional cost of \$79

Signature : _____ Date : _____

RESERVE TO MAJOR PLAN

The subscriber provided a proof of loss coverage..